

JAN. 22. 2004 5:01PM

858 792-6773 FOLEY AND LARDNER

NO. 7611 P. 1

FOLEY & LARDNER
ATTORNEYS AT LAW

11250 EL CAMINO REAL, SUITE 200

SAN DIEGO, CA 92130

P.O. BOX 80278

SAN DIEGO, CALIFORNIA 92138-0278

TELEPHONE: 858.847.6700

FACSIMILE: 858.792.6773

WWW.FOLEYLARDNER.COM

RECEIVED
CENTRAL FAX CENTER

JAN 22 2004

FACSIMILE TRANSMISSION**Total # of Pages: 15 (including this page)**

TO:	PHONE #:	FAX #:
Examiner C. Delacroix-Muirhead - Art Unit 1614 Commissioner for Patents	(703) 306-3227	(703) 872-9306

From: Stephen E. Reiter

SR

Sender's Direct Dial: 858.847.6711

Date: January 22, 2004

Client/Matter No: 071243-1404

User ID No: 1877

MESSAGE:**OFFICIAL**

Re: Application Serial No. 09/937,840

Following are copies of:

Amendment Transmittal (3 pgs.-in dupl.. = 6 pgs.);

Response to Restriction Requirement (8 pgs.).

If there are any problems with this transmission or if you have not
received all of the pages, please call 858.847.8700.

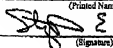
Operator:	Time Sent:	Return Original To: Joy Day
-----------	------------	--------------------------------

CONFIDENTIALITY NOTICE: THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENTS NAMED ABOVE. THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION, AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR ANY AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR, AND THAT ANY REVIEW, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.

Atty. Dkt. No. ABI1550-1
(071243-1404)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Soon-Shiong and Desai
Title: LONG TERM
ADMINISTRATION OF
PHARMACOLOGICALLY
ACTIVE AGENTS
Appl. No.: 09/937,840
Filing Date: 01/28/2002
Examiner: C. Delacroix-Muirhead
Art Unit: 1614

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Stephen E. Reiter (Printed Name)  (Signature) January 22, 2004 (Date of Deposit)

AMENDMENT TRANSMITTAL

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- [] Assertion of Small Entity status is enclosed.
- [X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	21	-	20	=	1	x	\$18.00	=	\$18.00
Independents:	5	-	5	=	0	x	\$86.00	=	\$0.00

Atty. Dkt. No. AB11550-1
(071243-1404)

First presentation of any Multiple Dependent Claims: +	\$290.00	=	\$0.00
	0		
CLAIMS FEE TOTAL	=		\$18.00

- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$110.00	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$420.00	\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$950.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,480.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,010.00	\$0.00
EXTENSION FEE TOTAL:		\$0.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$18.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$18.00

- ☒ Please charge Deposit Account No. 50-0872 in the amount of \$18.00. A duplicate copy of this transmittal is enclosed.
- ☐ A check in the amount of \$_____ is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such

Atty. Dkt. No. ABI1550-1
(071243-1404)

extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to
Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address
indicated below.

Respectfully submitted,

Date: January 22, 2004

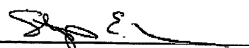
FOLEY & LARDNER

Customer Number: 30542

Telephone: (858) 847-6711

Facsimile: (858) 792-6773

By


Stephen E. Reiter
Attorney for Applicant
Registration No. 31,192